## BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECOF Effective October 1, 2001								Application or Docket Number						
								D .						
									B	ELL	-0	163		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN		
TOTAL CLAIMS		,	41				ſ	RATI	E	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 37		370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS		BLE CLAIMS	√/ minus 20=		* 21			X\$ 9=			OR	X\$18=	:578 -	
INDEPENDENT CLAIMS			← minus 3 =       ←        ←       ←       ←       ←       ←       ←       ←       ←       ←        ←					X42:		OR	X84=	84		
MULTIPLE DEPENDENT CLAIM PRESENT							Ī	+140=			OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL			OR	TOTAL	1202	
CLAIMS AS AMENDED - PART II									ļ		•	OTHER	THAN	
(Column 1) (Column 2) (Column 3)								SMA	LL I	ENTITY	OR I	SMALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	we land	Minus	** 4	f [	=		X\$ 9	)= 		OR	X\$18=		
WE!	Independent		Minus	*** /	4	=	Ī	X42:	=		OR	X84=		
	FIRST PRESEI	NTATION OF MU	JLTIPLE DEF	PENDEN	r CLAIM			+140	)=		OR	+280=		
								TO	TAL			TOTAL ADDIT. FEE	D	
:	KIE	(Column 1)		(Colu	ımn 2)	(Column 3)	,	ADDIT. F	rtE	<u> </u>		ADDII. FEE		
AENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N	Total	* (	Minus	** 1	fl.	=		X\$ 9	)=		OR	X\$18=	1	
AMENDA	Independent	* \	Minus	***	4	=		X42	=		OR	<b>\$</b>		
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDEN	IT CLAIM		۱	+140	)=		OR	298		
							L	TO ADDIT. I	TAL		OR	TOTAL ADDIT. FEE	1	
		(Column 1)		(Colu	ımn 2)	(Column 3)	,	AUUI I. I	rcE			ADDIT, FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER VIOUSLY D FOR	PRESENT EXTRA		RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ĬŽ O <u>W</u>	Total	*	Minus	**		=		X\$ 9	)=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X42	<u> </u>	<del>                                     </del>	OR	V04	<b>†</b>	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	NT CLAIM	1	!			<del>                                     </del>	1		<del> </del>	
	If the entry in col-	mn 1 is less than t	he entry in col-	umn 2 wr	ite "O" in co	olumn 3.		+140			OR	TOTAL	<del></del>	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														